## FORM D

# 443758

### UNITED STATES

## SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SE6 Mail Processing Section

AUG STOLEN

# **FORM D**

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number: 3235-0076						
Expires: June 30, 2008						
Estimated average burden						
1.						

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SEC	USE ONLY					
Prefix	Serial					
DAT	E RECEIVED					
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Name of Offering ( check if this is an amendment and name has changed, and indicate cha	nge.)						
Private Placement of Series A Redeemable Preferred Stock, Class A Common Stock and Class B Common Stock							
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ■ Rule 506 ☐ Sec	tion 4(6) ULOE						
Type of Filing: ■ New Filing □ Amendment							
A. BASIC IDENTIFICATION DAT							
Enter the information requested about the issuer							
Name of Issuer (  check if this is an amendment and name has changed, and indicate change	ge.) 08058256						
DRTH Holdings, Inc.							
Address of Executive Offices (Number and Street, City, State, Zip C	ode) Telephone Number (Including Area Code)						
c/o Austin Ventures, 300 West Sixth Street, Suite 2300, Austin, TX 78701	(512) 485-1900						
Address of Principal Business Operations (Number and Street, City, State, Zip C	ode) Telephone Number (Including Area Code)						
(if different from Executive Offices)	CED-						
Brief Description of Business PROCES	350						
Holding company							
Type of Business Organization AUG 2 6 2	108						
■ corporation ☐ limited partnership, already formed ☐ other	(please specify):						
□ business trust □ limited partnership, to be formed THOMSON D	HITEDS						
	EOILINO						
Actual or Estimated Date of Incorporation or Organization:  Month Year 0 7 8	■ Actual						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:							
CN for Canada; FN for other foreign jurisdi	<del></del>						

## **GENERAL INSTRUCTIONS**

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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•		A. BASIC IDEN	TIFICATION DATA						
2. Enter the information requested for the following:									
Each promoter of	the issuer, if the i	ssuer has been organize	d within the past five ye	ars;					
	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
Each executive of	ficer and director	of corporate issuers and	l of corporate general an	d managing parti	ners of partnership issuers; and				
		of partnership issuers.		00.	, ,				
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/or  Managing Partner				
Full Name (Last name first, Aragona, Joseph C.	if individual)			<del></del>	<u> </u>				
Business or Residence Addi c/o Austin Ventures, 300 W									
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	■ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Donaldson, Michael S.	if individual)								
Business or Residence Addr c/o Austin Ventures, 300 W									
Check Box(es) that Apply	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Austin Ventures IX, L.P.	if individual)								
Business or Residence Adda 300 West Sixth Street, Suit			Code)						
Check Box(es) that Apply	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, DRTH Acquisition Compa									
Business or Residence Adda c/o Austin Ventures, 300 W									
Check Box(es) that Apply	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	■ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Rodgers, Kevin	if individual)								
Business or Residence Adda 2122 N. Hudson Ave., Chic		Street, City, State, Zip	Code)		-				
Check Box(es) that Apply	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, Kowalik, James	Full Name (Last name first, if individual)  Kowalik, James								
	Business or Residence Address (Number and Street, City, State, Zip Code) 562 Winchester Trail, Angleton, TX 77515								
Check Box(es) that Apply	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 2 of 8

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

,					B. II	NFORMA	ATION A	BOUT O	FFERIN	G				
													Yes	<u>No</u>
1. F	las the iss	uer sold,								offering?.		****		-
					••			under UL	OE.				_	
2. \	What is th	e minim	um inves	tment that	will be a	ccepted fr	om any in	dividual?					S	<del></del>
													Yes	No
														-
1 0	or similar isted is ar of the bro	remuner associa ker or de	ation for ted personater. If r	solicitation solicitation	on of purc of a brok five (5) p	hasers in e er or deale ersons to	connectio er register	n with sal- ed with th	es of secu le SEC an	rities in th d/or with	ne offering a state or	ly, any commission g. If a person to be states, list the name or dealer, you may		
Full Nar	ne (Last n	ame first,	if individ	lual)										
Business	s or Reside	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)	<u> </u>						
Name of	f Associate	d Broke	r or Deale	r			<u> </u>							
States in	Which De	rcon List	ad Han Se	olicited or	Intende to	Solicit Pu	rchacers				_			
-														States
[AL] [IL]	[AK] [IL]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	(CT) [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Nar	ne (Last n	ame first	, if individ	lual)										
Business	s or Reside	ence Add	ress (Nun	nber and S	treet, City,	State, Zip	Code)							
Name of	f Associate	d Broke	r or Deale	r										
States in	Which Pe	erson List	ted Has Se	olicited or	Intends to	Solicit Pu	rchasers							
(Char	Jr " A 11 C+r	utac" ar al	haale indis	sidual Stat	ac)								□ Ail	States
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	<b>□</b> /	Diales
[IL]	[IL]	[[A]]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
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Busines	s or Reside	ence Add	ress (Nun	nber and S	treet, City,	, State, Zip	(Code)							
Name of	f Associate	ed Broke	r or Deale	r										
States in	Which Pe	erson Lis	ted Has Se	olicited or	Intends to	Solicit Pu	rchasers							
(Chec	ck "All Sta	ites" or cl	heck indiv	/idual State	es)								□ Aii	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IL]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]		
[MT] [RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.) 3 of 8

. C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE C	Æ PI	ROCEEDS		
Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box TM and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			<del></del>	
Type of Security		Aggregate Offering Price	A	mount Already Sold
Debt	<b>\$</b>		<b>s</b> _	
Equity :	<b>\$</b>	75,537,000.13	<b>S_</b>	58,087,000.14
■ Common ■ Preferred				
Convertible Securities (including warrants)	\$		<b>S</b> _	
Partnership Interests	\$		<b>\$</b> _	
	•		c	
Other (Specify)			ъ <u>_</u>	
Total	<b>\$</b>	75,537,000.13	<b>\$</b> _	58,087,000.14
Answer also in Appendix, Column 3, if filing under ULOE.				
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Number Investors		Aggregate Pollar Amount of Purchases
Accredited Investors	_	11	<b>s</b> _	58,087,000.14
Non-accredited Investors		0	\$	0
Total (for filings under Rule 504 only)			<b>s</b> _	
Answer also in Appendix, Column 4, if filing under ULOE.				
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.				
Type of offering		Type of Security		Oollar Amount Sold
Rule 505		•	e	Join
Regulation A			°-	
Rule 504			هـ ع_	
Total		•		
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<b>.</b>	
Transfer Agent's Fees			<b>s</b>	
Printing and Engraving Costs		🗆 9	S	
Legal Fees			\$	75,000.00
Accounting Fees			<b>s</b>	
Engineering Fees			<b>\$</b>	
Sales Commissions (specify finders' fees separately)			\$	
Other Expenses (identify) Expenses Blue sky filing fees		•	<b>\$</b>	900.00

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	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSI	S AN	D USE OF PROCE	EDS	
	b. Enter the difference between the aggregate offering protectal expenses furnished in response to Part C – Quest proceeds to the issuer."	ion 4.a. This difference is the "	adjuste	ed gross		\$ 75,461,100.13
	ndicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any purpose to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C - Que	ose is not known, furnish an estin payments listed must equal the	nate an	d check		
				Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	_ 🗆	\$
	Purchase of real estate			\$	_ 🗆	\$
	Purchase, rental or leasing and installation of machine	ery and equipment		\$	_ 🗆	\$
	Construction or leasing of plant buildings and facilities	es		\$	_ 🗆	\$
	Acquisition of other businesses (including the value of offering that may be used in exchange for the assets of pursuant to a merger)	or securities of another issuer		\$	_ •	\$ <u>75,461,100.13</u>
	Repayment of indebtedness	***************************************		\$		\$
	Working capital			\$	_ 🗆	\$
	Other (specify):			\$	_ 🗆	\$
				\$	_ 🗆	\$
	Column Totals			\$	=	\$75,461,100.13
	Total Payments Listed (column totals added)			<b>s</b>	 75,461	,100.13
	,					
		D. FEDERAL SIGNATURE		<u> </u>		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnish primation furnished by the issuer to any non-accredited in	sh to the U.S. Securities and Exc	hange	Commission, upon v	under R written i	tule 505, the following request of its staff, the
	uer (Print or Type) ITH Holdings, Inc.	Signature  M. Siff	(h.	e	Date Augu	st 19, 2008
	me of Signer (Print or Type) chael S. Donaldson	Title of Signer (Print or Type) Treasurer and Secretary				

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

F.	ST	ATE.	SI	CN	ΑТ	TURE	
12.	017			•	~ .		

1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?.. Yes No

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) DRTH Holdings, Inc.	Signature W. Sutt Del	Date August 19, 2008
Name (Print or Type) Michael S. Donaldson	Title of Signer (Print or Type) Treasurer and Secretary	

#### Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

